



LOS ANGELES COUNTY COMMISSION ON HIV

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While not required of meeting participants, signing-in constitutes public notice of attendance. Presence at meetings is recorded solely based on sign-in sheets, and not signing-in constitutes absence for Commission members. Only members of the Commission on HIV are accorded voting privileges, thus Commissioners who have not signed in cannot vote. Sign-in sheets are available upon request.

JOINT PUBLIC POLICY (JPP) COMMITTEE MEETING MINUTES August 18, 2010

Approved
9/23/2010

MEMBERS PRESENT	MEMBERS ABSENT	PUBLIC	HIV EPI AND OAPP STAFF	COMM STAFF/ CONSULTANTS
Lee Kochems, <i>Co-Chair</i>	Whitney Engeran-Cordova, <i>Co-Chair</i>	Aaron Fox	Elizabeth Escobedo	Jane Nachazel
Kyle Baker	Carrie Broadus	Jeffrey Christopher	Carlos Vega-Matos	Craig Vincent-Jones
Jeffrey Goodman	Stephen Simon	Terry Smith		Nicole Werner
Juan Rivera		Jason Wise		
Kathy Watt				

CONTENTS OF COMMITTEE PACKET

- 1) **Agenda:** Joint Public Policy (JPP) Committee Agenda, 8/18/2010
- 2) **Minutes:** Joint Public Policy (JPP) Committee Meeting Minutes, 7/21/2010
- 3) **Table:** Los Angeles County Commission on HIV, Joint Public Policy (JPP) Committee, FY 2010 Work Plan, 8/18/2010
- 4) **Strategy:** National HIV/AIDS Strategy for the United States, 7/2010
- 5) **Strategy:** National HIV/AIDS Strategy, Federal Implementation Plan, 7/2010

1. **CALL TO ORDER:** Mr. Kochems called the meeting to order at 2:20 pm.
2. **APPROVAL OF AGENDA:**
MOTION #1: Approve the Agenda Order with Item 14 postponed (***Passed by Consensus***).
3. **APPROVAL OF MEETING MINUTES:**
MOTION #2: Approve the 7/21/2010 Joint Public Policy (JPP) Committee Meeting Minutes, as presented (***Passed by Consensus***).
4. **PUBLIC COMMENT, NON-AGENDIZED:** There were no comments.
5. **COMMITTEE COMMENT, NON-AGENDIZED:** There were no comments.
6. **COMMITTEE MEMBERSHIP:**
 - A. **Co-Chair Elections:** Mr. Vincent-Jones reported Mr. Engeran-Cordova and Mr. Kochems were the only nominations.
MOTION #3: Elect Mr. Engeran-Cordova and Mr. Kochems as calendar year 2010 Co-Chairs (***Passed by Consensus***).
7. **CO-CHAIRS' REPORT:**
 - A. **Work Plan Introduction:**
 - Mr. Kochems noted the FY 2010 Work Plan was presented to the Executive Committee, approved by the Commission in July 2010 and will be presented to the Prevention Planning Committee (PPC).
 - Mr. Vincent-Jones is reviewing all subcommittees/work groups to clarify whether they have been convened/initiated.
 - Item IC3f, Revise Pol/Pro #09.3102 on JPP Relationship with PPC, pertains to a Commission-approved memorandum on how the PPC is incorporated in JPP, which is not yet in the Policy/Procedure format. The revision will primarily achieve that format consistency. Other revisions can be made at the same time, e.g., to reflect recent PPC restructuring.

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- Mr. Vincent-Jones noted some of the policy subjects were moved to clarify their place in Federal, State or other areas. The Regulatory Policy section was removed as it is the last step in other policy work.
- Item IIG3, Public Policy Initiatives pertains to positions the Commission has taken and wished to pursue further.
- Item IIG3d, Routine HIV Testing, pertains to previous legislation on testing during pregnancy. The Commission had chosen to pursue development of broader testing, e.g., for routine testing in other settings such as regular medical appointments. Ms. Watt noted the CDC has both clinical and non-clinical testing guidelines.
- ➡ JPP will discuss at a later date whether to keep a Services for Undocumented and Legal Residents Subcommittee on the Plan or move discussion to the Committee as a whole.
- ➡ Review Item IIG3d, Routine HIV Testing, in conjunction with CDC recommendations, HRSA guidance and a PPC presentation on its recommendations in September. Discussion will include clinical and non-clinical testing as well as State support and Federal testing goals.
- ➡ Merge Items IIA2, Care and Treatment, and IIA3, Prevention into IIA2, renamed Prevention, Care and Treatment to better emphasize the importance of integrating work for a more effective system.
- ➡ Noted that the acronym for testing and linkage to care is "TLC+."
- ➡ The Standards of Care (SOC) Committee will take the lead on developing the TLC+ plan for the Annual Meeting as SOC must address it in regards to standards and the Continuum of Care. Mr. Baker will attend the SOC TLC+ Work Group to ensure SOC/JPP coordination.
- ➡ Ms. Watt will forward UCHAPS TLC+ recommendations to Mr. Vincent-Jones.

B. Legislative Agenda Meeting:

- ➡ The meeting to identify JPP policy/legislative for the year will be 9/23/2010, 12:00 noon to 5:00 pm.

8. CORRECTIONS:

A. Sheriff's Department Discussions:

- Mr. Vega-Matos noted OAPP has been working with the Sheriff's Department for some time to address a range of issues along the continuum of HIV services from prevention to care. It is a top priority for Dr. Sayles.
- A meeting was held in March with OAPP, key Sheriff's Department representatives and Dr. Jonathan Fielding, Director, Public Health. Goals included establishing a common understanding of issues impacting 500 PWH+ inmates and improving HIV testing.
- The inventory of services was also discussed. The jail prevention program provides routine testing and other services, but has been moved to the inmate receiving center as a result of these discussions. Medication challenges were also discussed, especially around identifying and providing services and discharge planning. OAPP invests about \$500,000 with five agencies for Transitional Case Management (TCM) and funds an HIV coordinator in the jails.
- Some of the key challenges are access to information, e.g., transferring any existing medical information into the jail system to ensure continuity of care for those already receiving services, as well as various cost/process concerns.
- Mr. Vega-Matos is drafting an MOU between OAPP and the Sheriff's Department reflecting understandings reached during the meeting. A Nurse Case Manager (NCM) will be situated in the jail's medical unit to ensure continuity of care in coordination with Dr. Malick at the jails. CaseWatch will be deployed into the jails to improve information flow. The NCM will also be responsible for preparing documentation for TCM for discharge planning.
- There are OAPP challenges in coordinating the five TCM agencies, as well as jail issues such as lock-downs when case managers must leave. Also, inmates can be released anytime. This is being addressed with TCM offices inside the jail and narrowing PWH release times. OAPP is negotiating with TCM agencies to expand hours to 9:00 am to 9:00 pm Monday through Friday and some Saturday hours. In addition, a TCM agency, Center for Health Justice, has moved across from Twin Towers with a drop-in center, which they have agreed to keep open during the new release times.
- ADAP has been de-funded in jails. The Sheriff's Department will provide medications inside jails, but probably not at discharge. One possibility is for TCM case managers to become ADAP enrollers. One medical provider has also suggested a pilot project to station their mobile medical van outside the jail, so TCM can direct PWH to the van.
- The availability issue for the range of medications is a concern. There is also an administrative challenge in issuing medication to PWH in jail for just a few days.
- Ms. Watt noted further delays when a PWH is transferred from another facility, as well as for testing. Mr. Goodman noted those who self-identify as HIV+ or gay are transported to County rather than municipal facilities, but people often choose not to self-identify because time in jail can be lengthened from as little as one or two days to up to 45.

- Mr. Vega-Matos noted that all non-jail benefits cease on jail entry, so a PWH must re-enroll on exiting. OAPP is also looking at other potential TCM improvements, such as pick-up on release, transition to the drop-in center, or housing.
- Ms. Watt said some nurses keep medications for clients they know are likely to be re-arrested to tide them over on release, but there is also a problem with people selling medications. Mr. Goodman noted LAPD will allow arrestees to keep medications on them or that are nearby to give to jail personnel if they are not available in the jail.
- Mr. Vega-Matos said beyond medications, support services such as housing are especially important for high-risk PWH.
- It was noted that OAPP hosted a January joint meeting of the State Southern California TCM team and OAPP TCM. State case managers were unfamiliar with the OAPP TCM system of care, so were provided orientation and connections.
- ➡ Refer to P&P possible increase to TCM, including the possibility of providing one week medication for exiting inmates.
- ➡ Re-initiate Corrections Work Group with Mr. Goodman, Mr. Kochems, Mr. Vega-Matos or OAPP representative, Ms. Watt, Mr. Wise and representatives from the Consumer Caucus and Center for Health Justice. The Work Group will develop a plan that identifies municipal, County and State HIV correctional issues in order to track progress on solutions.
- ➡ Develop Educational Brief on options available for PWH who are arrested or incarcerated.

9. **STATE BUDGET:**

- Mr. Baker noted that negotiations have closed the gap to \$4 billion, but that is likely more for public relations purposes.
- Mr. Goodman noted slight media attention and asked if the State cash position was better. Mr. Baker said media appear simply to have lost interest. Mr. Vincent-Jones said legislators and staff are not being paid, but the State has made arrangements with banks for temporary loans. Furloughs have been approved to begin that Friday.
- Providers begin to bill against the new fiscal year in August, so the IOU issue would not begin to surface until this month.

10. **HEALTH CARE REFORM:**

A. **Health Care Reform Task Force:**

- The Task Force will encompass all related subjects and will subsume the Medi-Cal/Medicaid Subcommittee.
- ➡ This must be a Subcommittee as membership meets quorum: Mr. Baker, James Chud, Mr. Engeran-Cordova, Mr. Fox, Mr. Goodman and Mr. Simon. Staff will schedule the first meeting by email in the next few weeks.

B. **Commission Initiative/Annual Meeting:** This item was postponed.

C. **Medi-Cal Managed Care:** This item was postponed.

D. **Standards of Care:** This item was postponed.

E. **Health Care Reform Brief(s):** This item was postponed.

11. **NATIONAL HIV/AIDS STRATEGY:**

A. **Assessment:**

- ➡ Initiate Strategy Work Group: Mr. Baker, Mr. Engeran-Cordova, Mr. Fox, Mr. Goodman, Mr. Smith and Ms. Watt. Staff will schedule to precede or follow the Health Care Subcommittee. Mr. Smith will report on Prevention Planning Committee (PPC) work. Staff will collect relevant documents such as the Commission's Reauthorization Principles and Strategy comments, Project Reform report and the report from the Convening Committee which developed the Strategy.

B. **Implementation:** This item was postponed.

12. **STATE POLICY:**

A. **State Office of AIDS Allocation Formulae:**

- Mr. Vincent-Jones reported the Consumer Caucus suggested a two-prong strategy with the Caucus developing a letter focusing on the pattern of decision-making from a consumer perspective and JPP focusing on the test kit issue. JPP agreed the Caucus letter would be valuable and should include a copy to Dr. Mark Horton, Director, Public Health.

- Mr. Smith reported the PPC plans letters to Dr. Michelle Roland, Chief, Office of AIDS, expressing concerns; to the Co-Chairs of UCHAPS on the effect of the methodology in this jurisdiction; and to the CPG requesting clarification of their predecessor's (CHPG) involvement, if any, in recommendation development.
- Mr. Goodman felt OA hopes that the CPG body and the new, virtual Advisory Network will provide multiple perspectives. He noted the latter is going live ahead of schedule and recommended people actively participate in it.
- Mr. Baker noted a suggestion at the August Commission meeting to advise the Board. The City also offered support.
- Mr. Kochems suggested the Legislative Agenda meeting address legislation to ensure allocations follow national guidelines. Mr. Baker noted Alliance members have been discussing the possibility, but have no consensus on it.
- ➡ Mr. Vincent-Jones will summarize recommendations and staff will begin developing the letters suggested.

13. **HIV SURVEILLANCE:**

A. **AB 2541 (Portantino): Electronic Surveillance:**

- The legislation has passed the Appropriations Committee and gone to the Consent Calendar.
- Mr. Fox said privacy groups such as the ACLU proposed amendments to add language on how the State communicates with Federal agencies regarding data sharing. The amendments would not affect electronic reporting within the State.
- Mr. Baker noted Dr. Frye continues to express concern that not everything required for eHARS reporting is in the legislation. Dr. Frye and OAPP have repeatedly tried to ensure the needed amendments, but have been put off to the extent that the amendments appear unlikely. AIDS Healthcare Foundation, the sponsor, has been helpful. The primary block appears to be those concerned about privacy.
- ➡ Mr. Vincent-Jones will discuss the current iteration of AB 2541 with Ms. DeAugustine on 8/19/2010. He will ask her about the possibility of her coordination of a conclave to address the remaining amendments needed.
- ➡ Mr. Baker will update Mr. Vincent-Jones on the remaining issues.

14. **POLICIES AND PROCEDURES:** This item was postponed.

15. **PREVENTION:** Additional discussion on this item was postponed to the September meeting.

16. **PUBLIC BENEFITS:**

- Mr. Goodman noted last year the Commission allocated 1% of the award to Health Insurance Payments/Cost-Sharing (HIP/CS) which was a new service category. OAPP has not been able to launch this category for a variety of reasons.
- OAPP said at the 8/17/2010 P & P Committee meeting that Health Care Reform changes to insurance for those with pre-existing conditions obviate the need for HIP/CS, but he feels funds could ameliorate Medi-Cal Share-of-Cost.
- Ordinarily Federal legislation prohibits one Federal program from paying costs of another, but some jurisdictions are using Ryan White funds for this to ease stress on the Ryan White system. There has been no specific HRSA ruling on the subject.
- Mr. Vincent-Jones has information needed for a letter. The issue is being presented since it is policy. HRSA must respond to requests and the response becomes settled practice. While there is some risk, internal discussions with HRSA and their non-interference with jurisdictions doing this indicate a favorable response which would help all jurisdictions.
- Ms. Watt asked which jurisdictions now use the practice and might be harmed if the HRSA response is negative. Mr. Vincent-Jones said jurisdictions might not be forced to stop even if the response is negative. California is not currently using it due to interpretation of the legislation. Some of those using the practice are Dallas, St. Louis and New York.
- ➡ Raise the subject at All Grantees to further assess HRSA and jurisdictions' response. Bring motion back in September.

MOTION #4 (Goodman/Kochems): Move that the Joint Public Policy Committee endorse the idea of the Commission on HIV asking HRSA for clarification on the issue of Ryan White funds being used to pay Medi-Cal share-of-cost (**Withdrawn**).

A. **Medi-Medi Benefits from Medi-Cal Co-pays:**

- Mr. Vincent-Jones noted this issue was raised by Mr. Land who said Medi-Medi benefits had become cost-prohibitive due to higher Medi-Cal co-payments. Mr. Kochems noted he has heard similar concerns.
- ➡ Mr. Goodman will follow-up with Mr. Land and report back to Mr. Vincent-Jones. The systemic question will be referred to OAPP once it has been clarified.

17. **HIV/STD CONTROL IN THE ADULT FILM INDUSTRY:** This item was postponed.

18. **LEGISLATION/LEGISLATIVE PRIORITIES:** There was no additional discussion.

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- 19. **FEDERAL POLICY:** There was no additional discussion.
- 20. **CALIFORNIA CENTER FOR HIV/AIDS POLICY RESEARCH:** This item was postponed.
- 21. **WORK PLAN REVIEW:** This item was postponed.
- 22. **ANNOUNCEMENTS:** There were no announcements.
- 23. **ADJOURNMENT:** The meeting adjourned at 5:02 pm.